



NEWS RELEASE from the EU drugs agency in Lisbon

A GENDER PERSPECTIVE ON DRUG USE

Drug treatment services for women still limited in Europe

(23.11.2006, LISBON) Health services across Europe are waking up to the fact that women with drug problems have special needs and that these needs require specialised interventions, reports the **EU drugs agency (EMCDDA)**, but women-only treatment services remain extremely limited. The statement comes as the agency presents a gender perspective on drug use alongside its **2006 Annual report on the state of the drugs problem in Europe** released today ⁽¹⁾.

According to today's review, drug treatment facilities are usually organised around the needs of opioid addicts, who are mainly men, with 'gender-specific treatment' generally meaning interventions targeted at female drug users. But while nearly all **EU Member States** and **Norway** now offer at least one drug treatment unit exclusively for women, or for women with children, such services remain an exception, and are often limited to major urban centres. As a result, the majority of women are still assisted through generic services.

Commenting on the issue **EMCDDA Director Wolfgang Götz** says: 'Our report clearly documents that across Europe today examples of good treatment practice exist to guide us. Services are offered that work effectively with pregnant women, are sensitive to the concerns of women with children, and even work with the complex issues surrounding those whose drug problems are related to physical or sexual abuse. The issue we must address then is not the type of services women need, but rather how we can ensure that this type of specialised care becomes more accessible and widely available'.

Managing drug problems — and avoiding withdrawal distress — is important for safeguarding the health of mother and child. Specialised services that offer pregnant drug users preferential access to treatment now exist in many countries, although support does not always continue after the child is born.

Currently around 20% of those entering drug treatment in Europe are women. Studies have identified childcare concerns as a key factor discouraging women from seeking help — nearly one in four (23%) women accessing drug outpatient treatment services is currently living with children. Addressing childcare issues is therefore a central element in developing women-friendly services that can attract and retain female drug users in treatment. **Belgium, the Czech Republic, Germany, Greece, France, Ireland, Italy, Luxembourg, the Netherlands, Austria, Portugal, the UK and Norway** all offer programmes with a parenting component. While the focus of gender-specific services is usually on motherhood, one **Swedish** study for example highlights the importance of fatherhood for drug-addicted men.

Harm-reduction measures may be failing women

In all EU countries, more men than women die from drug overdose, with women accounting for between 7% and 35% of drug-related deaths, depending on the country. However today's review points to 'notable differences' between the genders in drug-related death trends. While overdose deaths in the EU fell among males by around 30% between 2000 and 2003 (EU-15), the number of deaths reported among females fell by only 15% over the same period. This raises the question of whether harm-reduction measures targeted at high-risk drug users are impacting less on women than on men.

Concerns also surround the relatively high rates of HIV infection found among women who inject drugs. Female injecting drug users (IDUs) are more often involved in sex work and are more vulnerable to HIV infection. Recent data from studies of IDUs in nine EU countries showed HIV prevalence to be on average 13.6% among male IDUs and 21.5% among females.

The **EMCDDA** warns that although, overall, more men inject drugs and die from using them, we cannot ignore the fact that female injectors may be at greater risk and harder to reach.

Is the gender gap narrowing?

‘There are marked differences between the genders in almost all aspects of the drug phenomenon’, says today’s review. Males still outnumber females among drug users in all European countries, particularly when use is frequent, intensive and problematic.

An **EMCDDA** analysis of survey data on the adult population (15–64 years) found no strong evidence that the gap is narrowing between levels of male and female drug use. However, data on drug use among school students (15–16 years) do reveal some worrying trends. In some Member States, girls appear to be catching up with boys in their lifetime use of drugs and alcohol, raising questions about the likely impact on future levels of drug use.

In the **Czech Republic, Denmark, Estonia, Ireland, Latvia, Poland, Slovakia** and **Norway**, for example, recent surveys show the gender gap has narrowed between school students who have ever tried cannabis (Figure 4). And in three countries — **Ireland, Finland** and **Norway** — roughly equal numbers of male and female students report ever using the drug. Similarly, gender ratios were approximately equal for lifetime use of ecstasy in the **Czech Republic, Germany, Spain, Estonia, Hungary, Ireland, Latvia, Slovakia, Finland** and the **UK** (Figure 5) ⁽²⁾.

Across Europe, binge drinking (five or more alcoholic drinks in one session in the last month) remains more commonly reported by boys, except in **Ireland, the UK** and **Norway** (Figure 8). The only type of drug use where girls regularly take the lead is in the lifetime use of tranquilisers and sedatives without a medical prescription. Here levels can be high: over half the reporting countries presented lifetime prevalence rates of 5% or over, rising to 18% among girls in **Lithuania** and 22% in **Poland** (Figure 7).

Boys — a missed opportunity for drug prevention

Young boys are at a higher risk than girls of using drugs and developing related problems. A growing body of research suggests that interventions tailored to the developmental needs of young males may be a promising area for service development. Despite these findings, gender-related prevention work remains uncommon across the EU, and, where applied, is usually associated with girls. The absence of prevention programmes specifically targeting the needs of boys therefore represents a missed opportunity for drug prevention work in Europe.

Finally **Wolfgang Götz** says: ‘It has been over 20 years since European governments first called for attention to be paid to gender issues in the drugs field. Today, a general recognition of the importance of this issue in principle is yet to be reflected in common practice. The message is clear: new services must respond to the fact that gender impacts on the kinds of problems individuals experience as well as on their willingness to engage in treatment and on the types of service that will prove effective’.

Notes:

⁽¹⁾ ‘A gender perspective on drug use and responding to drug problems’ – <http://issues06.emcdda.europa.eu>
All Figures quoted in this news release may be found in this *Selected issue*.

⁽²⁾ ESPAD data – <http://www.espad.org/index.html>